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DATE: APR 8 2009

PTO IDENTIFIER: Application Number 10/660,685-Conf. #7699
Patent Number

Inventor: Jose Vicente BARBERA ALACREU et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: BIRCH, STEWART, KOLASCH & BIRCH, LLP
Robert J. Webster

PHONE: (703) 205-8000

Attorney Dkt. #: 2644-0105P

PAGES (Including Cover Sheet): 17

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- Fax Cover Sheet (1 page)
- Certificate of Transmission (1 page)
- Transmittal (1 page)
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- Five Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
- Reply to Election of Species Requirement and Contingent Petition
Under 37 CFR §1.181 and §1.244 and Amendment (12 pages)
- Charge \$1,175.00 to deposit account 02-2448

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PTO/SB/07 (09-04)

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Application No. (if known): 10/660,685

Attorney Docket No.: 2644-0105P

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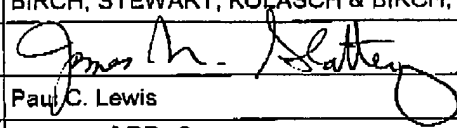
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/660,685-Conf. #7899	
	Filing Date	September 12, 2003	
	First Named Inventor	Jose Vicente BARBERA ALACRELL	
	Art Unit	3773	
	Examiner Name	V. Q. Bui	
Total Number of Pages in This Submission	15	Attorney Docket Number	2644-0105P

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation/Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Reply to Election of Species Requirement and Contingent Petition Under 37 CFR §1.181 and §1.244 and Amendment
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	BIRCH, STEWART, KOLASCH & BIRCH, LLP	
Signature	 #28380	
Printed name	Paul C. Lewis	
Date	APR 8 2009	Reg. No. 43,368

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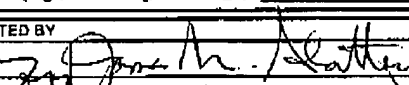
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4018). FEE TRANSMITTAL For FY 2009		Complete if Known	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number: 10/660,885-Conf. #7699	Filing Date: September 12, 2003
TOTAL AMOUNT OF PAYMENT (\$) 1,175.00		First Named Inventor: Jose Vicente BARBERA	Examiner Name: V. Q. Bui
		Art Unit: 3773	Attorney Docket No.: 2644-0105P

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description							Small Entity Fee (\$)
Each claim over 20 (including Reissues)							52
Each independent claim over 3 (including Reissues)							220
Multiple dependent claims							390
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
20		- 21 or HP	x	=	Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
2		- 3 or HP	x	=			
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
	- 100 =	/50 =	(round up to a whole number) x	=			
4. OTHER FEE(S)							Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 2255 Extension for response within fifth month							1,175.00

SUBMITTED BY			
Signature: 	Registration No. (Attorney/Agent): 43,368	Telephone: (703) 205-8000	
Name (Print/Type): Paul C. Lewis	Date: APR 8 2009		

Birch, Stewart, Kolasch & Birch, LLP

PCL/RJW/jmc